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Bib Data Sheet

CONFIRMATION NO. 3326

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/893,735 | <b>FILING DATE</b><br>06/29/2001<br><b>RULE</b> | <b>CLASS</b><br>375 | <b>GROUP ART UNIT</b><br>2631 | <b>ATTORNEY DOCKET NO.</b><br>P 281483<br>2010736US/BR/HER |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

Olli Piirainen, Oulu, FINLAND;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 08/16/2001

|  |                                |                        |                       |                            |
|--|--------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR<br>COUNTRY<br>FINLAND | SHEETS<br>DRAWING<br>5 | TOTAL<br>CLAIMS<br>12 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions<br>met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                |                        |                       |                            |
| Verified and<br>Acknowledged   | Examiner's Signature           | Initials               |                       |                            |

## ADDRESS

00909

## TITLE

Data transmission method and system

|                                       |   |   |
|---------------------------------------|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>970 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                                 |
|                                       |   | <input type="checkbox"/> 1.16 Fees ( Filing )                     |
|                                       |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |
|                                       |   | <input type="checkbox"/> 1.18 Fees ( Issue )                      |
|                                       |   | <input type="checkbox"/> Other _____                              |
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